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STATEMENT OF

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FORM 1	ORGANIZATION						4 MAR -6 AM 10: 00 Office Use Only					
NAME OF COMMITTEE (in	n full)	(Check if is change		Example over the	:If typing, ty lines.	уре	12FE					
Cory Gardr	ner for S	enate				1 1 1	1 1					لـــ
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ADDRESS (number and street)		227 E. LINCOLN	AVE., #200-2	234 			<u> </u>	_	<u> </u>			
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COMMITTEE'S E-MA	AIL ADDRESS											
(Check if address is changed)		isker@hdafed	c.com	<u> </u>		<u> </u>			<u> </u>]
	O _I k	ptional Second atie@thesta	E-Mail Addre Irboardgre	ess pup.com)			<u> </u>		ŧ I	<u> </u>	
COMMITTEE'S WEB (Check if a is changed	address _I w	SS (URL) ww.corygardner.c	com	 		1 1 1		. ! !			1 1.	
2. DATE 02	2 27	2014									-	
3. FEC IDENTIFIC	CATION NUMB	ER ▶	C coo.	192454 192454								
4. IS THIS STATEM	MENT	NEW (N)	OR	×	AMENDED	(A)						
I certify that I have e	xamined this S	tatement and to	the best of	my knowi	edge and b	elief it is t	true, co	rrect and	d complete	э.		
Type or Print Name o	of Treasurer L	isa Lisker	Www.fffords									
Signature of Treasure	r <i>Lisa Lisker</i>	Lia	R S	2		Da	te [ม น พ ๅ 03	01	/ <u>F</u> Y	2014	
NOTE: Submission of f		or incomplete in CHANGE IN IN							penalties	of 2 U.	S.C. §4	37g.
Office					urther inform							

Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

FEC FORM 1 (Revised 06/2012)